

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|----------------|
| FEE DETERMINATION | <i>[Signature]</i> | 71531 | 1/27/01 |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | 71531 | 1/29/01 |
| FORMALITY REVIEW | <i>[Signature]</i> | 71531 | 1/29/01 |
| RESPONSE FORMALITY REVIEW | | 71531 | 3/9/01/4/10/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | | 4/6/02 | |
| 2 | | 2/28/03 | |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy